



IPW

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|---|----|------------------------|---------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | Application No. | 10/699,402 |
| | | Filing Date | October 31, 2003 |
| | | First Named Inventor | Man Soo Han |
| | | Art Unit | 2616 |
| | | Examiner Name | Patel, Chandrabas B |
| Total Number of Pages in This Submission | 10 | Attorney Docket Number | 51876P399 |

| ENCLOSURES (check all that apply) | | |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">return postcard</div> |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|--|
| Firm or Individual name | Eric S. Hyman, Reg. No. 30,139 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP |
| Signature | |
| Date | 9/20/07 |

| CERTIFICATE OF MAILING/TRANSMISSION | | | |
|--|------------|------|---------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. | | | |
| Typed or printed name | Linda Metz | | |
| Signature | | Date | 9-20-07 |



Patent fees are subject to annual revision.

| | |
|----------------------|---------------------|
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| First Named Inventor | Man Soo Han |
| Examiner Name | Patel, Chandrahas B |
| Art Unit | 2616 |
| Attorney Docket No. | 51876P399 |

☒ Applicant claims small entity status. See 37 CFR 1.27.

| | | |
|--------------------------------|-------------|-------------|
| TOTAL AMOUNT OF PAYMENT | (\$) | 0.00 |
|--------------------------------|-------------|-------------|

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.

☐ Credit any overpayments

☒ Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.

1. EXTRA CLAIM FEES

| 1. EXTRA CLAIM FEES | | Extra Claims | Fee from below | Fee Paid |
|---------------------|----|------------------|----------------|----------|
| Total Claims | 12 | 20 th | 25.00 | \$0.00 |
| Independent Claims | 2 | 3 rd | 100.00 | \$0.00 |
| Multiple Dependent | | | | |

| Large Entity | Small Entity |
|---|---|
| <p>1. Revenue (Revenue from sales of goods and services)</p> <p>2. Cost of Sales (Cost of goods sold)</p> <p>3. Gross Profit (Revenue minus Cost of Sales)</p> <p>4. Operating Expenses (Salaries, rent, utilities, depreciation, etc.)</p> <p>5. Operating Income (Gross Profit minus Operating Expenses)</p> <p>6. Non-Operating Income/Expense (Interest income, dividend income, etc.)</p> <p>7. Income Before Taxes (Operating Income plus Non-Operating Income/Expense)</p> <p>8. Income Tax Expense (Income Before Taxes multiplied by the applicable tax rate)</p> <p>9. Net Income (Income Before Taxes minus Income Tax Expense)</p> | <p>1. Revenue (Revenue from sales of goods and services)</p> <p>2. Cost of Sales (Cost of goods sold)</p> <p>3. Gross Profit (Revenue minus Cost of Sales)</p> <p>4. Operating Expenses (Salaries, rent, utilities, depreciation, etc.)</p> <p>5. Operating Income (Gross Profit minus Operating Expenses)</p> <p>6. Non-Operating Income/Expense (Interest income, dividend income, etc.)</p> <p>7. Income Before Taxes (Operating Income plus Non-Operating Income/Expense)</p> <p>8. Income Tax Expense (Income Before Taxes multiplied by the applicable tax rate)</p> <p>9. Net Income (Income Before Taxes minus Income Tax Expense)</p> |

| <u>Fee Code</u> | <u>Fee (\$)</u> | <u>Fee Code</u> | <u>Fee (\$)</u> | <u>Fee Description</u> |
|-----------------|-----------------|-----------------|-----------------|---|
| 1202 | 50 | 2202 | 25 | Claims in excess of 20 |
| 1201 | 200 | 2201 | 100 | Independent claims in excess of 3 |
| 1203 | 360 | 2203 | 180 | Multiple Dependent claim, if not paid |
| 1204 | 790 | 2204 | 395 | **Reissue independent claims over original patent |
| 1205 | 300 | 2205 | 150 | **Reissue claims in excess of 20 and over original patent |

****or number previously paid, if greater. For Reissues, see below**

| | | |
|---------------------|-------------|-------------|
| SUBTOTAL (1) | (\$) | 0.00 |
|---------------------|-------------|-------------|

2 ADDITIONAL FEES

| ADDITIONAL FEES | |
|---|--|
| Large Entity | Small Entity |
| <p>1. Initial Filing Fee (required for all entities): \$400</p> <p>2. Annual Report Fee (required for all entities): \$100</p> <p>3. State Tax Fee (required for all entities): \$50</p> <p>4. Franchise Fee (required for all entities): \$1,000</p> <p>5. Transfer Fee (required for all entities): \$500</p> <p>6. Renewal Fee (required for all entities): \$100</p> <p>7. Amendment Fee (required for all entities): \$100</p> <p>8. Restatement Fee (required for all entities): \$100</p> <p>9. Other Fees (required for all entities): \$100</p> | <p>1. Initial Filing Fee (required for all entities): \$200</p> <p>2. Annual Report Fee (required for all entities): \$50</p> <p>3. State Tax Fee (required for all entities): \$25</p> <p>4. Franchise Fee (required for all entities): \$500</p> <p>5. Transfer Fee (required for all entities): \$250</p> <p>6. Renewal Fee (required for all entities): \$50</p> <p>7. Amendment Fee (required for all entities): \$50</p> <p>8. Restatement Fee (required for all entities): \$50</p> <p>9. Other Fees (required for all entities): \$50</p> |

| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description |
|----------|----------|----------|----------|--|
| 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath |
| 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet. |
| 2053 | 130 | 2053 | 130 | Non-English specification |
| 1251 | | 2251 | | Extension for reply within first month |
| 1252 | | 2252 | | Extension for reply within second month |
| 1253 | | 2253 | | Extension for reply within third month |
| 1254 | | 2254 | | Extension for reply within fourth month |
| 1255 | | 2255 | | Extension for reply within fifth month |
| 1401 | | 2401 | | Notice of Appeal |
| 1402 | | 2402 | | Filing a brief in support of an appeal |
| 1403 | | 2403 | | Request for oral hearing |
| 1451 | | 2451 | | Petition to institute a public use proceeding |
| 1460 | | 2460 | | Petitions to the Commissioner |
| 1807 | | 1807 | | Processing fee under 37 CFR 1.17(q) |
| 1806 | | 1806 | | Submission of Information Disclosure Stmt |
| 1809 | | 1809 | | Filing a submission after final rejection (37 CFR § 1.129(a)) |
| 1810 | | 2810 | | For each additional invention to be examined (37 CFR § 1.129(b)) |

Other fee (specify)

SUBTOTAL (2)**Fee Paid**

SUBMITTED BY

Name (Print/Type) **Eric S. Hyman**

Signature

Registration No.
(Attorney/Agent)

~~30,139~~

Telephone

(310) 207-3800

Date _____

9/20/07

Based on PTO/SB/17 (02-07) as modified by Blakely, Sokoloff, Taylor & Zafman (wlr) 02/26/2007.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Patent Application of:

Man Soo Han et al.,

Serial No. 10/699,402

Filing Date: 10/31/2003

For: INPUT BUFFERED SWITCHES USING
PIPELINED SIMPLE MATCHING AND
METHOD THEREOF

Examiner: Patel, Chandras B

Art Unit: 2616

Confirmation No. 3288

Mail Stop: Amendments
Commissioner for Patents
Post Office Box 1450
Alexandria, Virginia 22313-1450

AMENDMENT AND RESPONSE TO OFFICE ACTION

Sir:

In response to the Office Action mailed June 21, 2007, regarding the above- referenced application, Applicant respectfully requests entry of the amendments set forth below in consideration of the remarks that follow.